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Applicant(s): Ota) Art Unit: JAN 09 2007
Serial No.: 10/656,031) Examiner: Philippe, Gims S.
Filing Date: September 5, 2003) Atty. Docket#: 50M2895.02
For: ADAPTIVE CLOCKING MECHANISM FOR) January 8, 2007
DIGITAL VIDEO DECODER) 750 "B" Street, Suite 3120
San Diego, CA 92101
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FACSIMILE TRANSMITTAL LETTER AND RESPONSE
TO NOTICE REQUIRING EXCESS CLAIMS FEES

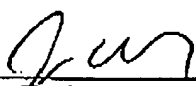
Commissioner for Patents
Alexandria, VA 22313
Facsimile No.: (571) 273-8300

Dear Sir:

In response to the Notice Requiring Excess Claims Fees dated January 4, 2007, transmitted are the following:

1. A copy of the Notice Requiring Excess Claims Fees;
2. PTO/SB/06;
3. A credit card payment form authorizing the payment of requisite fees.

Respectfully submitted,


John L. Rogitz
Attorney of Record
Registration No. 33,549
750 "B" Street, Suite 3120
San Diego, CA 92101
Telephone: (619) 338-8075

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/656,031	09/05/2003	Takaaki Ota	50M2895.02	8470

7590 01/04/2007
John L. Rogitz
ROGITZ & ASSOCIATES
750 B Street, Suite 3120
San Diego, CA 92101

EXAMINER

PHILIPPE, GIMS S

ART UNIT	PAPER NUMRER
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2621

SHORTENED STATUTORY PERIOD OF RESPONSE	MAIL DATE	DELIVERY MODE
30 DAYS	01/04/2007	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

If NO period for reply is specified above, the maximum statutory period will apply and will expire 6 MONTHS from the mailing date of this communication.



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450
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10-656,031

NOTICE REQUIRING EXCESS CLAIMS FEES

The excess claim(s) filed on 12-18-06 is not accompanied by the appropriate payment of excess claims fees set forth in 37 CFR 1.16(h)-(j) or 1.492(d)-(f). Excess claims fees are required for each claim in independent form in excess of three (§ 1.16(h)), each claim (whether dependent or independent) in excess of twenty (note that § 1.75(c) indicates how multiple dependent claims are considered for fee calculation purposes) (§ 1.16(i)), and each application that contains a multiple dependent claim (§ 1.16(j)).

Since the application is not under a final rejection, applicant is given a time period of **ONE (1) MONTH or THIRTY (30) DAYS** from the mailing date of this notice, whichever is longer, to submit either: (1) the fee payment of \$ 200.00, or (2) an amendment in compliance with 37 CFR 1.121 that cancels the excess claim(s), in order to avoid ABANDONMENT. Extensions of this time period may be granted under 37 CFR 1.136, unless the excess claim(s) was presented in a preliminary amendment.

- ☐ 1. The funds in Deposit Account No. _____ are insufficient to cover the entire fee due. The balance is due within the time period set forth in this notice. See note below regarding the appropriate service charge.
- ☐ 2. The Credit Card payment to cover the entire fee due to Account _____ (Card type + last 4 digits ONLY) was refused. The balance is due within the time period set forth in this notice. See note below regarding the appropriate service charge.
- ☒ 3. The amendment that includes the excess claim(s) has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account or Credit Card) the fee as indicated on the attached Patent Application Fee Determination Record (PTO/SB/06). Remittance or authorization is due within the time period set forth in this notice.
- ☐ 4. The fee submitted in this application is insufficient. A balance of \$ _____ is due for presentation of excess claims (37 CFR 1.16(h)-(j) or 1.492(d)-(f)).
- ☐ 5. Other.

Explanation (Provide specific details of the required correction in order to assist the applicant. Indicate whether a service charge has been added to the fee due):

THE AMOUNT OF THE FEE(S) DUE IS SUBJECT TO CHANGE, GENERALLY ON OCTOBER 1 OF EACH YEAR (37 CFR 1.16, 1.21 & 1.492). THE AMOUNT OF THE FEE(S) DUE IS DETERMINED AS OF THE DATE A COMPLETE REPLY WITH THE APPROPRIATE FEE(S) IS RECEIVED BY THE OFFICE (37 CFR 1.8 & 1.10). BECAUSE THE AMOUNT DUE IS SUBJECT TO CHANGE, IT IS RECOMMENDED THAT APPLICANT CHECK THE CURRENT FEE SCHEDULE WHICH IS AVAILABLE ON THE USPTO'S WEBSITE AT: <http://www.uspto.gov/web/offices/uc/qs/ope/fees.htm>

Service Charges: There is a \$50 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21(m)). There is a \$25.00 service charge for each month when the balance of a deposit account is below \$1000 at the end of the month (37 CFR 1.21(b)(2)).

Sheresa Hawkins (571) 272 1567
Technical Support Staff (TSS)

Note to TSS: Please do NOT use this notice if the application is under a final rejection.

PTOL-319 (Rev 5-05)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-676					Application or Docket Number 10-656,031		
APPLICATION AS FILED - PART I							
	(Column 1)	(Column 2)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE (\$)	FEE (\$)		RATE (\$)	
BASIC FEE (37 CFR 1.18(a), (a) or (c))				150		300	
SEARCH FEE (37 CFR 1.18(a), (c), or (d))				250		500	
EXAMINATION FEE (37 CFR 1.18(a), (c), or (d))				100		200	
TOTAL CLAIMS (37 CFR 1.18(f))		minus 20 =	X \$ 25		OR	X \$ 50	
INDEPENDENT CLAIMS (37 CFR 1.18(g))		minus 3 =	X \$ 100			X \$ 200	
APPLICATION SIZE FEE (37 CFR 1.18(h))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$200 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(d)(7)(C) and 37 CFR 1.18(h).						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(i))			N/A			N/A	
			TOTAL			TOTAL	
* If the difference in column 1 is less than zero, enter "0" in column 2.							
APPLICATION AS AMENDED - PART II							
	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY
AMENDMENT A	2/18/06	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)
	Total (37 CFR 1.18(f))	23	Minus	25	X =		X =
	Independent (37 CFR 1.18(g))	4	Minus	3	X =		X \$ 200 =
Application Size Fee (37 CFR 1.18(h))							
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(i))				N/A			N/A
				TOTAL ADD' FEE		TOTAL ADD' FEE	200 ⁰⁰
AMENDMENT B	(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(f))	Minus	=	X =		X =	
	Independent (37 CFR 1.18(g))	Minus	=	X =		X =	
Application Size Fee (37 CFR 1.18(h))							
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(i))				N/A		N/A	
				TOTAL ADD' FEE		TOTAL ADD' FEE	
<p>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</p> <p>** If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".</p> <p>*** If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".</p> <p>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</p>							

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.